

Collaborative Service Areas:

ORAL HEALTH DATA

Bureau of Oral and Health Delivery Systems | October 2021

SUMMARY

Statewide

- Over 40% of Iowa children 20 and younger are enrolled in Medicaid;
- Children under 3 enrolled in Medicaid are least likely to access dental care and children under 1 enrolled in Medicaid are 10 times more likely to receive a dental service from I-Smile than either a dental clinic or FQHC;
- 41 of Iowa's 99 counties do not have a dentist taking new referrals of Medicaid enrollees;
- Children ages 3-5 are most likely to use a medical setting for preventable dental diagnoses (extensive decay abscesses, etc.) compared to children through 20 years of age.

Non-White Groups

- Children of non-white racial and ethnic groups make up 21 percent of Iowa's 20 and younger population, with Buena Vista, Crawford, Marshall, Wright and Franklin counties among those with highest proportions;
- Children of non-white racial and ethnic groups are more likely experience a preventable dental diagnosis in a medical setting than white children;
- Counties with higher proportions of non-white populations (i.e. Buena Vista) also have higher rates of being uninsured, free/reduced lunch eligibility, Medicaid-enrollment, and using a medical setting for preventable dental diagnoses.

Geographic Areas

- Buena Vista, Crawford, Marshall, Tama, Wright, Franklin, & Woodbury counties show high need in uninsured, Medicaid enrollment, non-white populations, English proficiency, and free/reduced lunch rates;
- Southern-most two rows of counties hold the highest proportions of children 18 and younger in poverty;
- Southeastern Iowa counties are least likely to receive a dental service from a dental clinic
- Children enrolled in Medicaid and residing in northwestern and southeastern Iowa counties are least likely to receive a dental service from any provider

ANY DENTAL OR ORAL HEALTH SERVICE

Data Source: Centers of Medicaid and Medicare Service, EPSDT Report, FFY2019

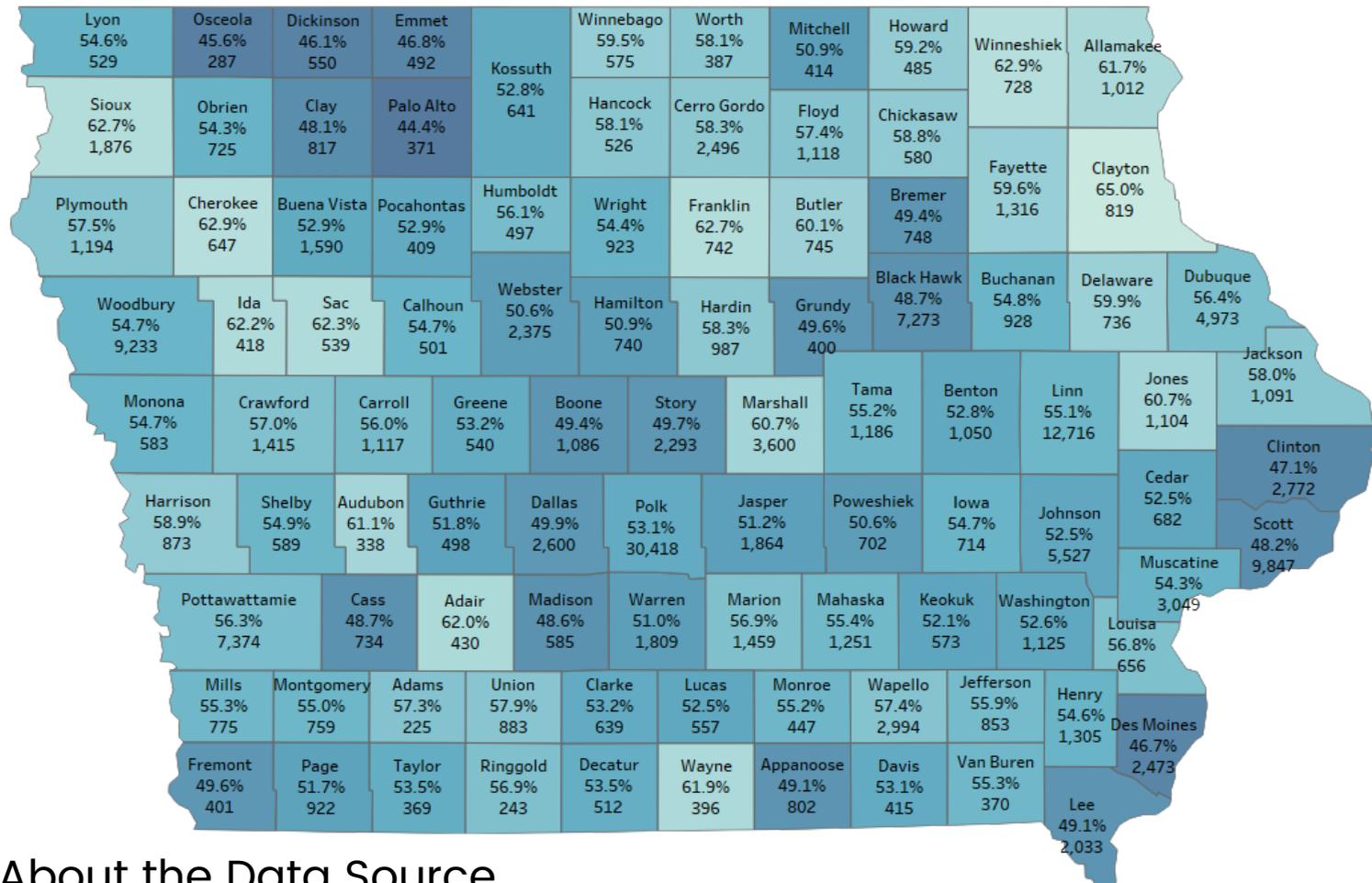
Indicator

The percentage of children ages 20 and younger enrolled in Iowa Medicaid that had a reimbursed dental or oral health service within Federal Fiscal Year 2019.

STATE VALUE: 53.6% (175,965 kids)

Main Findings

Counties in northwestern Iowa, including Palo Alto, Osceola, Dickinson, and Emmet counties, as well as Des Moines and Clinton are among those with the lowest rates, with less than half of children ages 20 and younger receiving a dental service from any provider.



About the Data Source

Federal statute requires states to annually report information relating to Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services provided under the State plan. Iowa Medicaid Enterprise further disaggregates the data by county. Strengths: allows us to better understand access to services among enrollees across the state; comparable across states. Limitations: Doesn't allow for further disaggregate data, such as by service provider or race and ethnicity.

DENTAL CLINIC VISIT

Data Source: Iowa Medicaid Enterprise Paid Claims, SFY2019

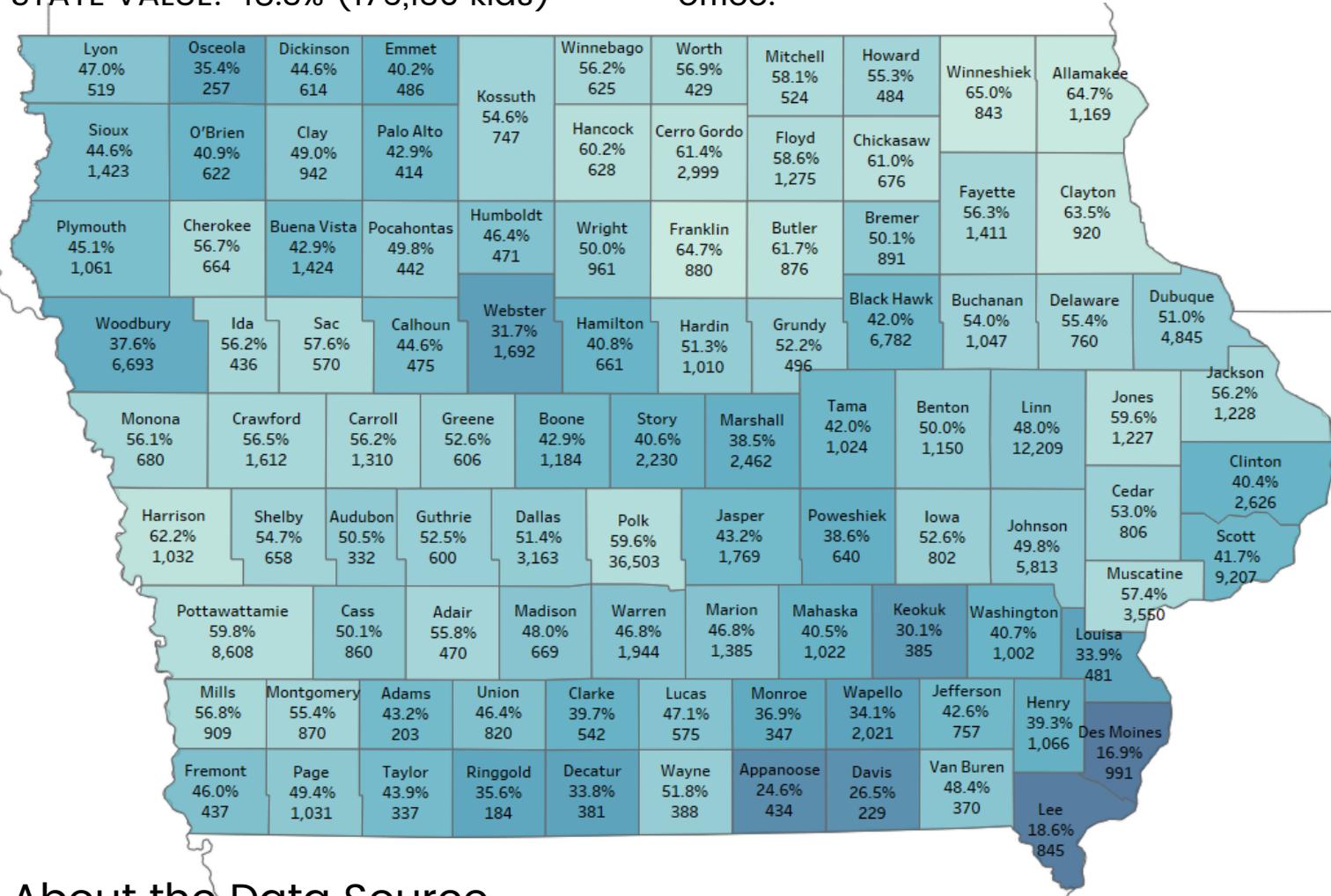
Indicator

The percentage of children ages 20 and younger enrolled in Iowa Medicaid with a reimbursed dental claim from a dental office within State Fiscal Year 2019.

STATE VALUE: 48.3% (176,130 kids)

Main Findings

Counties in southern Iowa, including Des Moines, Lee, Davis, and Appanoose counties are those with the lowest rates, with less than 1 in 5 children ages 20 and younger enrolled in Iowa Medicaid received a dental service from a dental office.



About the Data Source

Iowa Medicaid Enterprise Paid Claims collects reimbursed dental claims and enrollment information based on State Fiscal Year. Strengths: allows us to better understand access to services among enrollees across the state. Limitations: The data system is meant to pay claims rather than collect data.

FQHC DENTAL VISIT

Data Source: Iowa Medicaid Enterprise Paid Claims, SFY2019

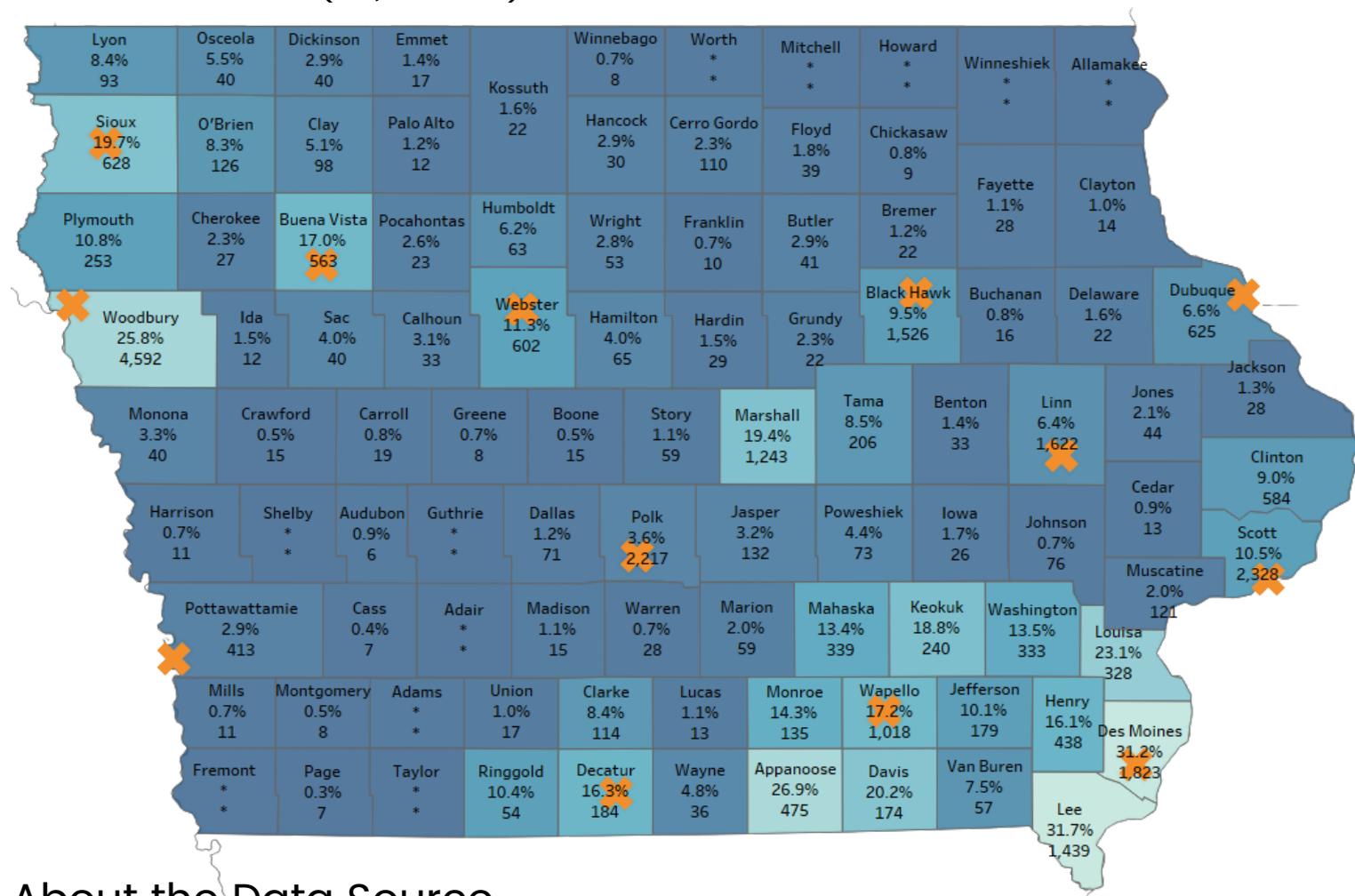
Indicator

The percentage of children ages 20 and younger enrolled in Iowa Medicaid with a reimbursed dental claim from a Federally Qualified Health Center (FQHC) within State Fiscal Year 2019.

STATE VALUE: 7.4% (26,921 kids)

Main Findings

Counties in southern Iowa, including Des Moines, Lee, and Appanoose counties are those with the highest rates, with nearly 1 in 3 children ages 20 and younger enrolled in Iowa Medicaid received a dental service from a FQHC.



About the Data Source

Iowa Medicaid Enterprise Paid Claims collects reimbursed dental claims and enrollment information based on State Fiscal Year. Strengths: allows us to better understand access to services among enrollees across the state. Limitations: The data system is meant to pay claims rather than collect data.

I-SMILE DENTAL VISIT

Data Source: Iowa Medicaid Enterprise Paid Claims, SFY2019

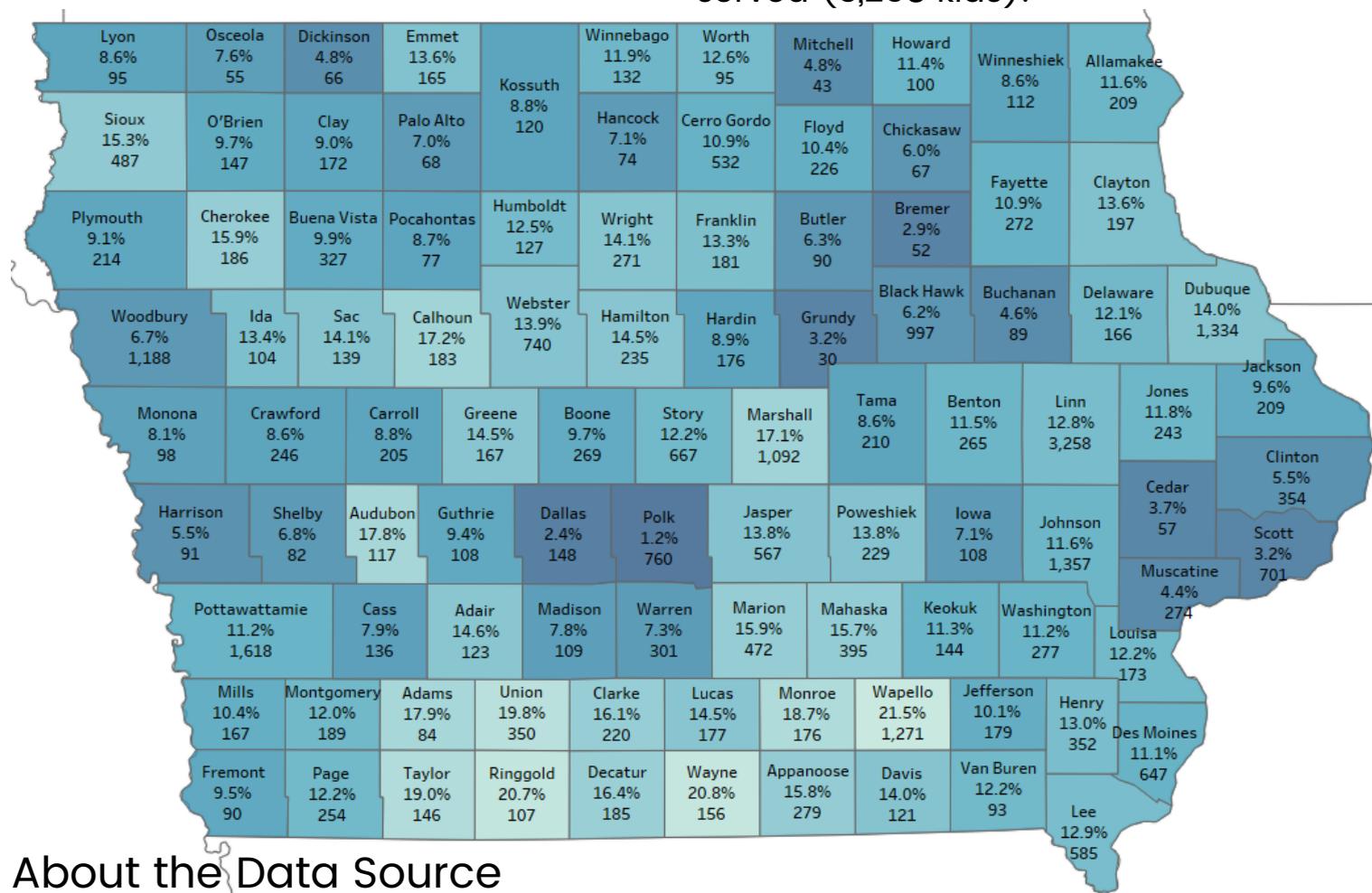
Indicator

The percentage of children ages 20 and younger enrolled in Iowa Medicaid with a reimbursed dental claim from I-Smile within State Fiscal Year 2019.

STATE VALUE: 8.7% (31,798 kids)

Main Findings

Counties in southern Iowa, including Wapello, Wayne, and Ringgold counties are those with the highest rates, with more than 1 in 5 children ages 20 and younger enrolled in Iowa Medicaid received a dental service from I-Smile. Linn county had the most children served (3,258 kids).



About the Data Source

Iowa Medicaid Enterprise Paid Claims collects reimbursed dental claims and enrollment information based on State Fiscal Year. Strengths: allows us to better understand access to services among enrollees across the state. Limitations: The data system is meant to pay claims rather than collect data.

DENTISTS TAKING NEW MEDICAID REFERRALS

Data Source: Dental Referral Survey of I-Smile Coordinators, June 2021

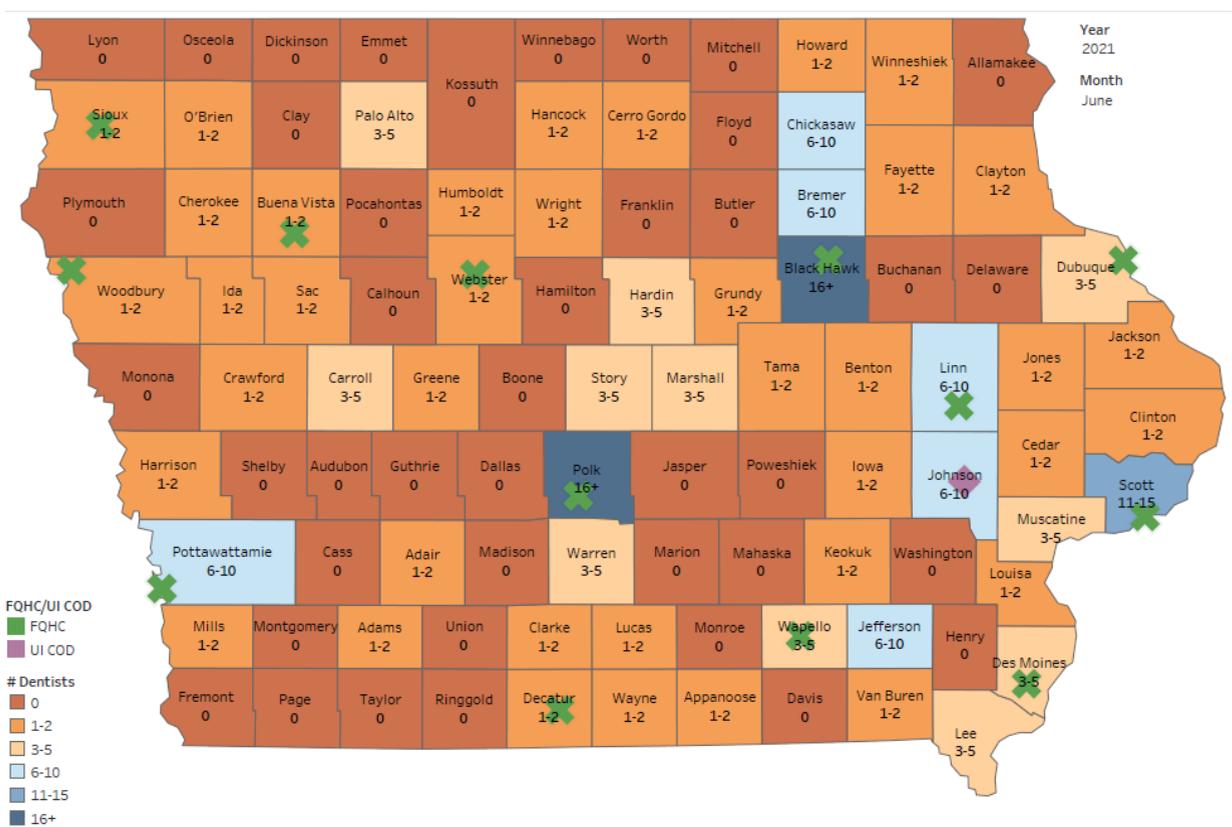
Indicator

The number of dentists in each county taking new referrals for Medicaid enrollees as of June 2021.

STATE VALUE: n/a

Main Findings

Forty-one of Iowa's 99 counties (41%) do not have a dentist taking new referrals for Medicaid enrollees. These counties are spread out across the state, but are most heavily concentrated in northwestern and southwestern Iowa.



* Dentists are counted in each county of practice (duplicated across counties)
 * Dentists providing services at FQHC main and satellite clinics are included, however the University of Iowa College of Dentistry (UI COD) is excluded
 * Does not account for hours worked or restrictions of each dentist (i.e. only taking those living in the town/county, 1 day a month)
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June 2021

About the Data Source

The Dental Referral Survey is asked of I-Smile Coordinators on a six month interval. Dentists are counted in a county if they can be referred to in that county at any point, even if it is not their primary office. Dentists practicing at FQHCs are included in the count. Limitations: Changes frequently; does not determine amount of availability or conditions of referrals (i.e. must live in same town/county, only for 1 day per month)

REPORTED DENTAL VISIT DURING PREGNANCY

Data Source: Iowa Barriers to Prenatal Care Survey, 2019

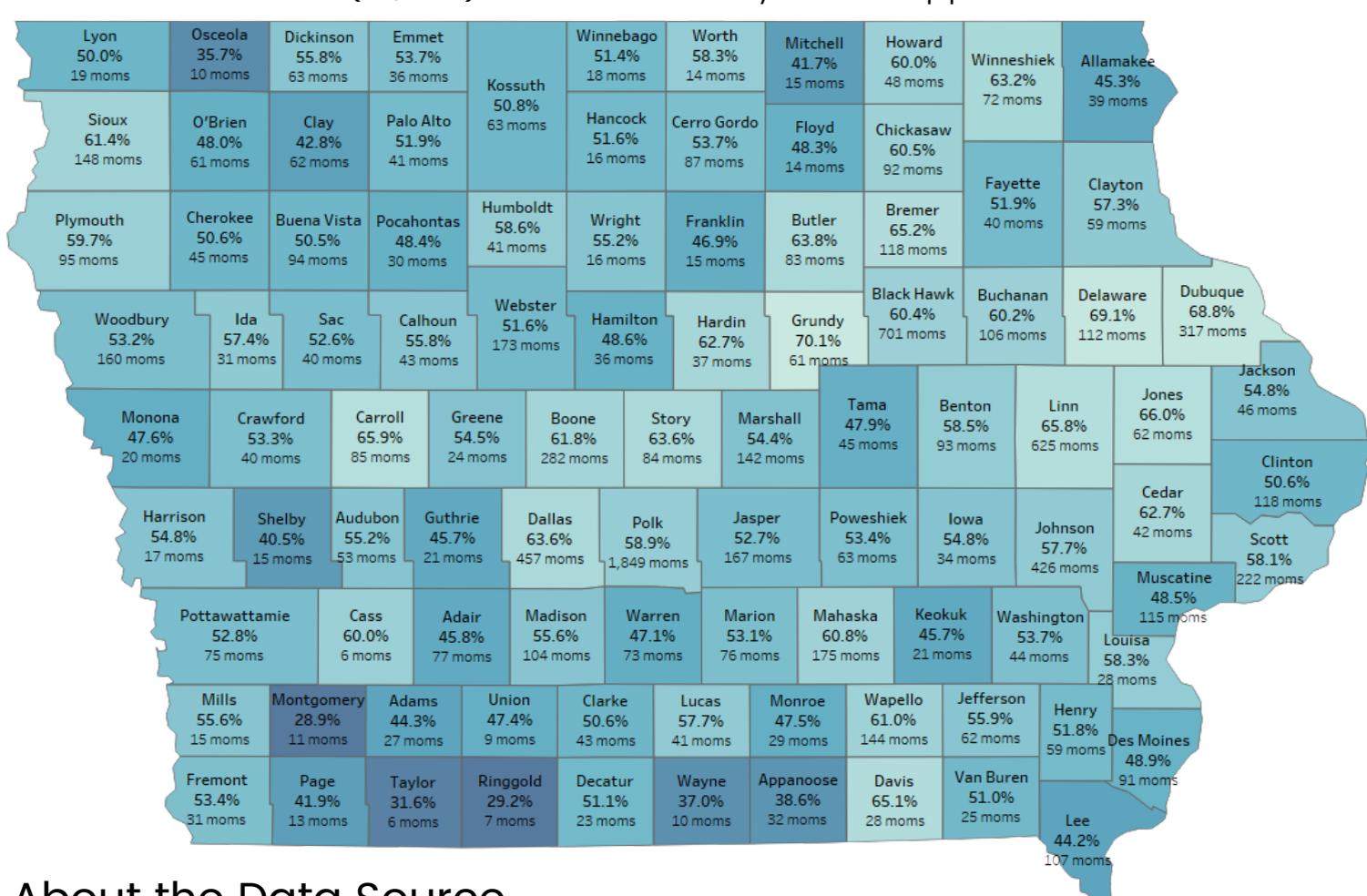
Indicator

The percentage of new birth moms in each county who reported having a dental visit during their most recent pregnancy.

STATE VALUE: 57.2% (10,526)

Main Findings

Less than 1 in 3 new birth mothers in southwestern Iowa counties Montgomery, Ringgold, and Taylor reported a dental visit during pregnancy. Followed closely by Osceola, Wayne and Appanoose counties.



About the Data Source

The Iowa Barriers to Prenatal Care Survey is provided to every mother who gives birth in an Iowa hospital. Oral health questions are asked every other year.

Strengths: this is a census sample, meaning all mothers giving birth in Iowa are included, providing a robust sample size. Limitations: Iowa mothers giving birth outside of Iowa or through home birth are not included in the survey results.

I-SMILE DECAY

Data Source: I-Smile Program Data (signifycommunity), SFY2020

Indicator

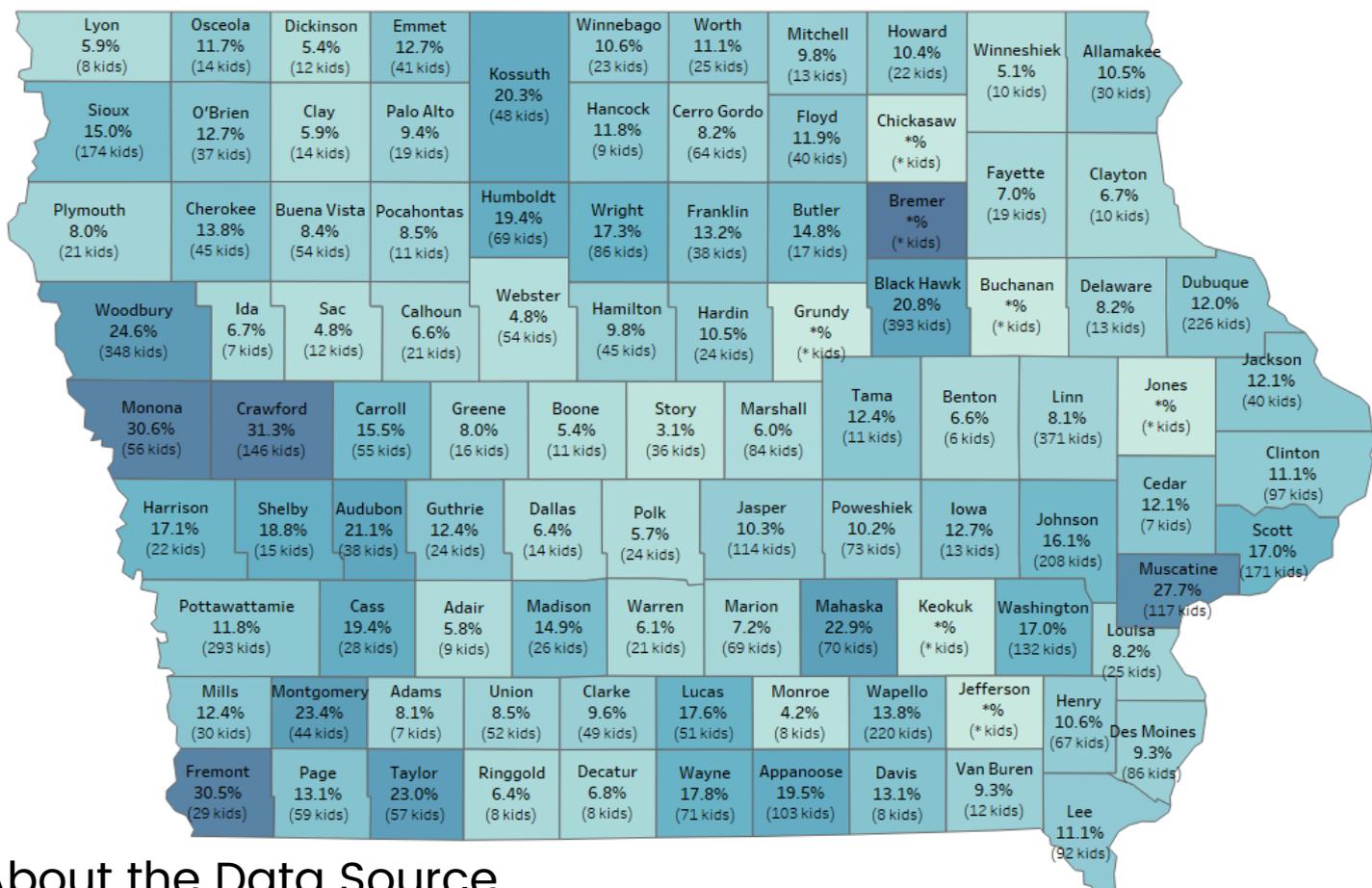
The percentage of children age 0-20 screened by I-Smile in each county with decay.

STATE VALUE: 12.2% (5,647 kids)

*indicates suppressed value: count of 1-5

Main Findings

Counties in western Iowa, including Crawford, Monona, and Fremont counties, report decay among nearly 1 in 3 children screened through I-Smile. Non-white children have a higher decay rate (15.1%) than white children (10.8%) and compose one third of participants.



About the Data Source

The I-Smile Program Data, via signifycommunity, collects information on I-Smile program participants and services, including oral health status, access to services, and demographics. Strengths: allows us to compare contractor service areas and identify areas of need or discrepancy. Limitations: program data is not representative of the county population, it is only representative of those children served and screened by I-Smile; contractor screening populations can vary making county comparison less valid.

PREVENTABLE DENTAL CASES IN MEDICAL SETTING

Data Source: Iowa Hospital Outpatient Data, 2019

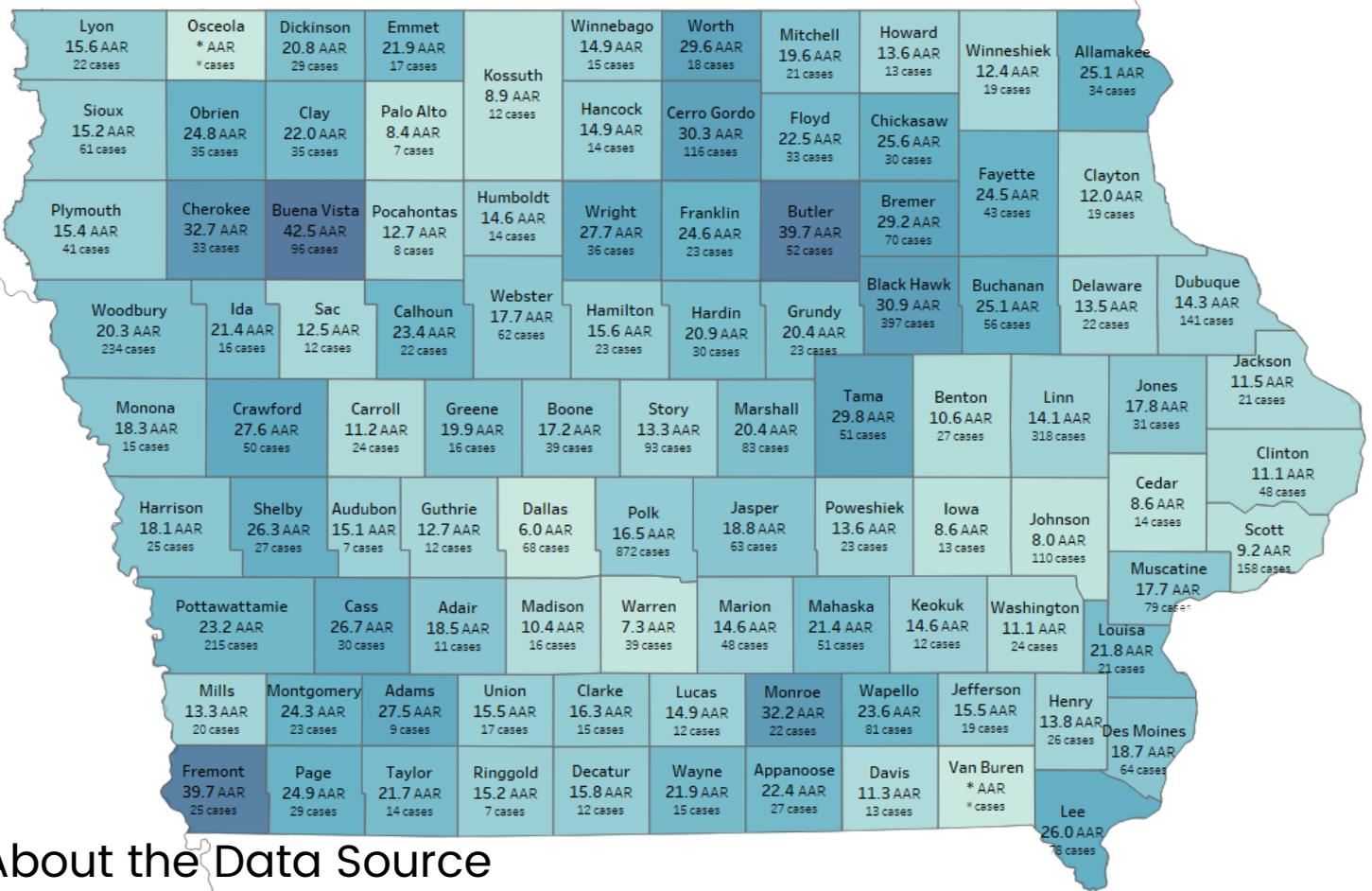
Indicator

The number of billed preventable dental cases billed in an outpatient medical setting among children 0-20 in 2019. (Based on ICD-10 codes)

STATE VALUE: 5,296 cases
(16.8 cases per 10,000 kids)

Main Findings

- Most common among children ages 3-5 (2,596 cases)
- Higher rates among non-white racial and ethnic groups
- Most cases in Polk county (872 cases)
- Highest rates among Buena Vista, Butler, and Fremont counties (~40 cases per 10K lowans)



About the Data Source

The Iowa Hospital Association collects outpatient data from Iowa hospitals on behalf of the Iowa Department of Public Health per state statute. Strengths: allows high risk groups to be identified across counties. Limitations: multiple visits by the same patient cannot be identified or excluded. Residents of border counties may receive care outside of Iowa and would not be counted in these data.